

**Certificate of Cancellation
of Foreign Limited Liability Company**

The undersigned, pursuant to Senate Bill No. 2395, Chapter 402, Laws of 1994, hereby executes the following Certificate of Cancellation of registration, and for that purpose submits the following statement:

1. Name of Limited Liability Company**2. Telephone****3. The Limited Liability Company desires to cancel its registration to do business in the State of Mississippi.**

By: Signature

(Please keep writing within blocks)

Printed Name

Title

Street and Mailing Address

Physical
Address

P.O. Box

City, State, ZIP5, ZIP4